



Effective Health Care

Complementary and Alternative Medicine Therapies for Inflammatory Bowel Disease (IBD) Nomination Summary Document

Results of Topic Selection Process & Next Steps

- The topic, *Complementary and Alternative Medicine Therapies for Inflammatory Bowel Disease (IBD)*, is not feasible for a full systematic review due to the limited data available for a review at this time.
- The topic could potentially be considered for new research in comparative effectiveness.

Topic Description

Nominator(s): Individual

Nomination Summary: The nominator is interested in the comparative effectiveness of traditional Chinese medicine to standard treatment options for ulcerative colitis flare-ups (e.g., pharmaceuticals, biologics, surgery) as well as in the prevention of relapse after experiencing positive benefits with this treatment. The topic was expanded to include Crohn's disease using the umbrella term "inflammatory bowel diseases" (IBD) and other forms of complementary and alternative therapy options vs. current standard of treatment.

Population(s): Individuals (adults and children) suffering from ulcerative colitis or Crohn's disease (IBD)

Intervention(s): Complementary and alternative medicine (CAM) therapies (e.g. traditional Chinese medicine, acupuncture, etc.) in addition to or instead of standard treatment. Diet was not examined as a potential intervention.

Comparator(s): Standard treatment options alone (pharmaceuticals, surgery)

Outcome(s): Relief of ulcerative colitis or Crohn's (IBD) symptoms, quality of life, remission, overall morbidity and mortality

Key Questions from Nominator: What are the comparisons of/for the treatment of ulcerative colitis? Specifically, how do the results of sulfasalazine, cortenema, hydrocortisone, prednisone, immunosuppressive therapy, and surgery compare to traditional Chinese medicine such as food combinations, herbal prescriptions, and acupuncture?

Considerations

- The topic meets Effective Health Care (EHC) Program appropriateness and importance criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)

- Inflammatory bowel disease (IBD) comprises two types of chronic intestinal disorders: Crohn's disease and ulcerative colitis. IBD affects approximately 1.4 million Americans, and accounts for more than 700,000 physician visits, 100,000 hospitalizations, and disability in 119,000 patients.
- Standard treatment options for IBD include anti-inflammatory drugs such as steroids and immune system suppressors, antibiotics, and surgery. The majority of patients with Crohn's disease will require surgery at some point during their lives, as this becomes necessary when medications can no longer control the symptoms.
- Nutritional management of IBD (elemental formula) is also used routinely in some centers primarily outside of the US. Complementary and alternative medicine (CAM) such as mind/body medicine, body-based practices, energy medicine, traditional Chinese medicine, herbs, pre- and probiotics, vitamins, and aloe vera have also been used to treat IBD
- The published studies were focused on single types of CAM therapies and varied widely in terms of the types of CAM examined. In addition, existing systematic reviews also suggest that the evidence on the use of CAM in IBD is of poor quality and that larger clinical trials are needed to adequately assess the whether CAM is beneficial to individuals with IBD. Although an AHRQ systematic review is not feasible at this time, ongoing clinical trials may provide additional evidence on this topic in the future.